

### **REMARKS**

Entry of this Amendment and reconsideration are respectfully requested in view of the amendments made to the claims and the remarks made herein.

Claims 1-3 and 5-18 are pending and stand rejected. Claims 1, 8, 9, 16, 17 and 18 have been amended. Claims 1-3 and 5-18 stand rejected under 35 USC §102(e) as being anticipated by Evans (USP no. 6,347,329) which is the same rejection that was recited in the previous Office Action.

The instant Office Action states that the "pre-chosen findings are interpreted as a list of options for the user to select from and the Tabs disclosed ... allows the user to select any of the Tabs based on the required action ... as disclosed in Fig. 5. ...Referring to Fig. 8, 158 and 182-184, ... the Evans system displays the medical report simultaneously by showing ... a complete information on one screen and the X-ray on another screen." (see page 4-5, Instant Office Action).

Applicant respectfully disagrees with, and explicitly traverses, the reason for rejecting the claims. However, in the interest of advancing the prosecution of this matter applicant has elected to amend the claims to more clearly state the invention. More specifically, the claims have been amended to recite that the user is enabled to enter data into the selected pre-chosen findings and the respective pre-chosen findings and the user entered data may be added to the summary section. No new matter has been added. Support for the amendment may be found at least on page 5, line19 – page 6, line 1 and Figure 5 and the discussion of Figure 5 on pages 10-12.

Evans, on the other hand, discloses a medical reporting system that creates and maintains all patient data electronically. The system uses a TAB oriented graphic user interface, e.g., Figure 5, to allow a user(s) to enter data. The user may select one of the TABs to view a second display and enter data thereon (see col. 6, lines 55-59, which state, in part, "[i]n a similar manner, to activate the patient data capture 140, the clinical data capture 142 or the encounter data capture 146, one selects the patient data tab 151, the clinical data tab, 142, or the encounter data tab 153, respectively."). Furthermore, to display a second window, as shown with regard to Figure 8, Evans discloses that "a ...

provider uses the patent chart window 180 [the main window] to view patient data. First, the healthcare provider selects a view item either by pointing and clicking twice on the item in a list displayed in the folder window 184 or pointing at the item in the list and pressing the view button 183. The double click opens a viewer window 185 [the second window] to display the view item 182.” (see col. 7, lines 33-41). Accordingly, the system disclosed by Evans teaches a system that enables a user to view specific information regarding a patient using a TAB based graphic user interface, where the TABS are general operations performed with regard to patient care, and further allows the user to review more specific information in a second window when desired by the user.

However, as will be shown, Evans fails to disclose material elements recited in the claims that distinguish the instant invention from the method of Evans. More specifically, Evans fails to disclose the elements of “pre-chosen findings comprising a plurality of medical conditions that are associated with a particular portion or sub-portion of a living body,” “displaying pre-chosen findings comprising a plurality of medical conditions that are associated with a particular portion or sub-portion of a living body and a separate medical report simultaneously on an electronic display, the medical report comprising a summary section, and “selecting a pre-chosen finding based on a diagnosis of the particular portion or sub-portion of the body,” as is recited in the claims.

It is well recognized that to constitute a rejection pursuant to 35 USC §102, i.e., anticipation, all material elements recited in a claim must be found in one unit of prior art.

Evans discloses a GUI defining pre-chosen sections (TABS) that enables a user to enter data with regard to a patient. The sections represent different areas associated with monitoring of a patients medical history, results of tests and the methods used to heal the patient. For example, the TAB section headings are shown as Progress Notes, Laboratory, Clinical Data, etc. These are generic medical operational headings associated with different aspects of patient care.

With regard to the TAB sections, these sections are merely placeholders for the placement of information regarding a patient by one or more medical providers. Hence, the sections merely allow a user to enter data (see col. 6, lines 49-51, which state, in part,

“[p]ointing and clicking on a tab ... opens a folder window where a healthcare provider can enter and review patient data within the folder.”). These sections are not analogous to either the “pre-chosen findings” or “a particular portion of a body,” as claimed. Rather, the files associated with the TABs are associated with a particular provider function and not to a particular portion of a body.

Similarly, while the medical provider may include information regarding a patient’s medical condition, and to a particular portion of a body, in a selected section, Evans provides no discussion with regard to the sections containing pre-chosen findings with regard to a particular portion of a body. Rather, the data is entered in a textual and/or graphic form, as shown in Figure 8, for example.

Hence, contrary to the position stated in the Office Action the TAB interface of Evans cannot be said to be analogous to the “pre-chosen findings comprising medical conditions associated with a particular portion of a living body,” as claimed.

The Office Action further states that Figure 8 is analogous to the claim element “displaying pre-chosen findings comprising a plurality of medical conditions associated with a particular portion or sub-portion of a living body and a separate medical report simultaneously on an electronic display, the medical report comprising a summary section.” However, as shown above Evans fails to disclose pre-chosen findings and, hence, it is not possible for Evans to anticipate the element claimed. Furthermore, even if it could be said that pre-chosen findings were disclosed, which they are not, Figure 8 refers to the user being able to open a second window to review more specific information with regard to a selected entry made in the patient’s history. However, this second window does not include a summary section nor does Evans discuss such a summary section.

In fact, assuming that the progress notes section may be considered analogous to the summary section claimed, then Evan would fail to disclose the simultaneous display of pre-chosen findings and the summary report. In this assumed case, the summary report would be one of the TAB sections and Evan fails to disclose the ability to disclose two TAB section simultaneously.

Hence, contrary to the position stated in the Office Action, Figure 8 of Evans cannot be said to be analogous to the “display of pre-chosen findings comprising medical conditions associated with a particular portion of a living body ... and a medical report comprising a summary section,” as claimed.

With regard to the element “selecting a pre-chosen finding based on a diagnosis of the particular portion or sub-portion of the body,” as discussed above, Evans fails to disclose pre-chosen findings and the TAB interface is not analogous to the pre-chosen findings claimed. Accordingly, Evans cannot disclose the element claimed as the element is not disclosed.

For all the reasons recited, Evans cannot be said to anticipate the invention recited in independent claim 1 because Evans fails to disclose material element claimed.

Having shown that Evans fails to disclose at least one material element claimed, applicant submits that the reason for the rejection has been overcome and can no longer be sustained. Applicant respectfully requests withdrawal of the rejection and allowance of the claim.

With regard to independent claims 8, 9, 16, 17 and 18, these claims were rejected for the same reason used in rejecting claim 1 and have been amended in a manner similar to that of claim 1. Hence, for the amendment made to these claims and for the remarks made with regard to claim 1, which are applicable and reasserted herein, as if in full, applicant submits that claims 8, 9, 16, 17 and 18, include subject matter not disclosed by Evans and, thus, are patently distinguishable from, and allowable over, the apparatus disclosed by Evans. Accordingly, applicant respectfully requests withdrawal of the rejection and allowance of claims 8, 9, 16, 17 and 18.

With regard to the remaining claims, these claims depend from a respective independent claim, all of which have been shown to be allowable over the cited reference. Accordingly, the remaining dependent claims are also allowable by virtue of their dependency upon an allowable base claim.


Although the last Office Action was made final, this amendment should be entered. The independent claims have each been amended to more clearly state the invention. Since no matter has been added to the claims that would require comparison

with the prior art or any further review only require a cursory review is required by the examiner. The amendment therefore should be entered without requiring a showing under 37 CFR 1.116(b).

For all the foregoing reasons, it is respectfully submitted that all the present claims are patentable in view of the cited references. A Notice of Allowance is respectfully requested.

Respectfully submitted,  
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